Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90018 034 ***158.75

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 60

T. Corporation	HU KRAFT, INC.							
Principal Place of Business Mailing Address					* 198419 Bride river reconstitut	OFFICE FIRS DISKI WI	DI(BKBAI DIBII B	
5900 ENTERPRISE PARKWAY 5900 ENTERPRISE PARKWAY								
FT.MYERS FL 33905 FT.MYERS FL 33905								
						RITE IN THIS	SPACE	
					3. Date Incorporated or Qualife	d		
· -					09/18/1979 4. FEI Number			the of East
	ace of Business	2a. Mailing Address			59-2086546		<u> </u>	Applicable
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.			39 2000340		\$8.75 A	
	#, etc.	⊢			5. Certifcate of Status Desired			quired
City & State	<u> </u>	City & State	<u></u>		6. Election Campaign Financing	······································	\$5.00	
23	-	28			Trust Fund Contribution	'□	Added to	
Zip	Country	Zip	Country		8. This corporation owes the cu	rrent year Inta	ingible	
24	25	29 30	<u> </u>		Personal Property Tax.	•		□No
	9. Name and Address of Current				10. Name and Address of New	Registered A	Agent	
			81	Name				
BUNDSCHU, CHARLES C., III			82	Street Add	dress (P.O. Box Number is Not Accep	table)		
	ENTERPRISE PARKWAY							
FORT MYERS FL 33905			83	83				
			84	City		FL	85 Zip C	Code
agent, I a	to the provisions of Sections of Newsonian agistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent	ons of, Section 607.0505, Florida ,	a Statutes	•	red when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS 13.		13.		ADDITIONS/CHANGES TO C	FFICERS AN	D DIRECTO	RS IN 12
TITLE	DV	☐ DELETE	1.1 TITLE			_	Change	☐ Addition
NAME	KRAFT, DAN		1.2 NAME					
STREET ADDRESS	5900 ENTERPRISE PARKWAY		1.3 STREET	ADDRESS	•			. [
CITY-ST-ZIP	FT MYERS, FL 00000		1.4 CITY-S	T-ZIP				
TITLE	PD	☐ DELETE	2.1 TITLE				☐ Change	Addition
NAME	BUNDSCHU, CHARLES C. III		2.2 NAME					
STREET ADDRESS	5900 ENTERPRISE PKWY		2.3 STREET	ADDRESS				
CITY-ST-ZIP	FT MYERS, FL 00000		2.4 CITY-5	T-ZIP '				The section of
TITLE	DST	☐ DELETE	3.1 TATLE				Change	Addition
NAME	BUNDSCHU, GAYLE P.		3.2 NAME		·	•		
STREET ADDRESS	5900 ENTERPRISE PKWY		3.3 STREET	ADDRESS				}
CITY-ST-ZIP	FT. MYERS FL	□ DELETE	3.4. CITY-S	T-ZIP	·		[T] Change	Addition
TITLE	•	☐ DELETÉ	4.1 TITLE				Griange	
NAME			4.2 NAME					ŀ
STREET ADDRESS	-		4.3 STREET					ļ
CITY-ST-ZIP		☐ DELETE	4.4 CITY-S' 5.1 TITLE	I-ZIP			Change	Addition
TITLE			5.1 TITLE 5.2 NAME					
NAME			5.3 STREET	ADDRESS				
STREET ADDRESS			54 CITY+S					

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or por an attaching with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: '

STREET ADDRESS

TITLE

NAME

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

941-693-1000

Change

Addition